

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM
DR-2

(Rev. 07/2004)

DISCLOSURE
REPORT

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa PAC

IMPORTANT: Indicate by # type of committee you are reporting for: 2

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other
Political Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political
Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party (if applicable)

Office Sought

District (if Senate or House)

For Office Use Only

Comm. #

Logged In

Scanned

Computer

Audited

6052

WRS

WRS

WRS

Late reports are subject to
possible civil and criminal
penalties.

SIGNATURE OF PERSON FILING REPORT

TELEPHONE

DATE SIGNED

I AM FILING A _____ REPORT FOR (1) ELECTION / (2) NON-ELECTION YEAR.

(report date)

Indicate by # ☐

☒ CHECK IF AMENDMENT TO REPORT DATED 5/19/2004

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the
committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period or must be zero if this is first report filed.)

\$ 10,381.21

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

17,801.00

Schedule F: Loans Received total (Attach Schedule F)

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)...

4,250.00

Schedule F: Loan Repayments total (Attach Schedule F)

CASH ON HAND at the end of this reporting period (if final report balance must
be zero) (Attach DR-3)

\$ 23,932.21

**UNPAID BILLS (From Schedule D - Attach Schedule D)

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐

YES

☐

NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input checked="checked" type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)
Independent Insurance Agents of Iowa PAC

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4/1/2004	ID# CK#	West Bank West Des Moines IA		\$1.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 1.00	
TOTAL (if last page of this schedule)				\$ 17,801.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa Political Action Committee

IMPORTANT: Indicate type of committee you are reporting for: ☒ 2(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee

CANDIDATE COMMITTEES ONLY:

Candidate Name

Political Party

Office Sought

District (If Senate or House)

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

FORM
DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT

For Office Use Only

Comm. #

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IA ETHICS & CAMPAIGN
DISCLOSURE BOARD

MAY 19 2004

FILED

515-223-6800

5-19-04

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19 REPORT FOR AN/A (1) ELECTION /(2) NON-ELECTION YEAR.
(report date) Indicate one ☒ 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in
which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held
by the committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period, or must be zero if this is first report filed.)

\$ 9,783.71

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

17,800.00

Schedule F: Loans Received total (Attach Schedule F)

-

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

-

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

27,583.71

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

4,250.00

Schedule F: Loan Repayments total (Attach Schedule F)

-

CASH ON HAND at the end of this reporting period (if final report, balance must
be zero) (Attach DR-3)

\$ 23,333.71

**UNPAID BILLS (From Schedule D - Attach Schedule D)

-

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

-

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

-

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES☐ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
1-28-04	ID# CK#	Hans Boehm 229 West Walnut, Box V Ogden, IA 50212		\$ 100	<input type="checkbox"/>
1-28-04	ID# CK#	Dan Fulwider 4000 Westown Parkway West Des Moines, IA 50266		25	<input type="checkbox"/>
3-29-04	ID# CK#	Anne Molneaux 100 Kirkwood Blvd, P.O. Box 939 Davenport, IA 52803		250	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Philp Philp Insurance Agency Davenport, IA 52625		25	<input type="checkbox"/>
3-29-04	ID# CK#	Duff Coleman 101 E 10th Street, Box 67 Monticello, IA 52310		50	<input type="checkbox"/>
4-1-04	ID# CK#	Gary Fisher 514 B Avenue, Box 390 Kalona, IA 52247		50	<input type="checkbox"/>
4-1-04	ID# CK#	Chris Nissen 111 W. Platt Street Mcquoketa, IA 52060		50	<input type="checkbox"/>
4-7-04	ID# CK#	Terry Friedman P.O. Box 759 Dubuque, IA 52004		100	<input type="checkbox"/>
3-29-04	ID# CK#	Robert Plueger 523 Lombard, Box 460 Clarance, IA 52216		25	<input type="checkbox"/>
3-29-04	ID# CK#	Tom Norton 200 Ford Avenue Fairfield, IA 52761		100	<input type="checkbox"/>
SUB-TOTAL				\$ 775	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
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☐ CHECK THIS BOX IF
AMENDING FORM
COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
3-29-04	ID# CK#	Phil Tyler 111 W. Mills, P.O. Box 167 Creston, IA 50801		\$ 25.00	<input type="checkbox"/>
3-29-04	ID# CK#	Holly Distarkoff 1024 Court Avenue, Box 244 Marango, IA 52301		50	<input type="checkbox"/>
3-29-04	ID# CK#	Butch Welch Box 335 Danellison, IA 52625		100	<input type="checkbox"/>
3-29-04	ID# CK#	Pete Dolan 107 E. Delaware, Box 250 Manchester, IA 52057		100	<input type="checkbox"/>
3-29-04	ID# CK#	Russell Heitmann 219 W. Welsh, Box 450 Williamsburg, IA 52361		50	<input type="checkbox"/>
3-29-04	ID# CK#	John Heiberger P.O. Box 303 Epworth, IA 52045		50	<input type="checkbox"/>
3-29-04	ID# CK#	Raylin Barnett P.O. Box 167 Kandake, IA 50447		100	<input type="checkbox"/>
3-29-04	ID# CK#	Tom Douglas 2007 4th Street SW Mason City, IA 50401		25	<input type="checkbox"/>
3-29-04	ID# CK#	Dennis Donnelly 601 1st W Independence, IA 50644		100	<input type="checkbox"/>
3-29-04	ID# CK#	Maurice Abans P.O. Box 85 Humboldt, IA 50548		50	<input type="checkbox"/>
SUB-TOTAL				\$ 875	
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev 07/03)	MONETARY RECEIPTS
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☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents - of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(8), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	Gene Wagner 109 S. Broad Street, Box 188 Staquille, IA 50476		\$ 15	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Rohde 11 East Church Street Marshalltown, IA 50158		50	<input type="checkbox"/>
3-29-04	ID# CK#	Roger Stahlhelm 922 W. Court Avenue Winterset, IA 50273		50	<input type="checkbox"/>
3-29-04	ID# CK#	Richard Elmer 113 14 Federal Mason City, IA 50401		25	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Krieger Box 366 Dayton, IA 50530		100	<input type="checkbox"/>
3-29-04	ID# CK#	Gary Anderson P.O. Box 35 Swedesburg, IA 52652		50	<input type="checkbox"/>
3-29-04	ID# CK#	Theodore Lucsem 2919 John Patterson Road Des Moines, IA 50317		100	<input type="checkbox"/>
3-29-04	ID# CK#	Tim Hardie 109 West 2nd Street Ottumwa, IA 52501 Box 159		100	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Donhawe P.O. Box 67 Des Moines, IA 50310		100	<input type="checkbox"/>
3-29-04	ID# CK#	Larry Friedman P.O. Box 759 Dubuque, IA 52004		25	<input type="checkbox"/>

SUB-TOTAL

\$ 615

TOTAL (If last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	James Unger 103 E Lincoln Way, Box 191 Jefferson, IA 50129		\$ 100	<input type="checkbox"/>
3-29-04	ID# CK#	Frank Weinstein 1420 1st Ave NE Cedar Rapids, IA 52402		100	<input type="checkbox"/>
3-29-04	ID# CK#	Brian Gifford P.O. Box 489 Elkader, IA 52043		75	<input type="checkbox"/>
3-29-04	ID# CK#	Kurt Vogel P.O. Box 605 Jesup, IA 50648		25	<input type="checkbox"/>
3-29-04	ID# CK#	Marian Fitzsimmons P.O. Box 278 Vail, IA 51465		25	<input type="checkbox"/>
3-29-04	ID# CK#	Scott Lerdal 9 N. 5th Street, Box 707 Humboldt, IA 50548		50	<input type="checkbox"/>
4-1-04	ID# CK#	Dan Cuning 112 W. Madison, Box 311 Mount Airy, IA 50854		100	<input type="checkbox"/>
4-1-04	ID# CK#	Steve Fettke 2007 4th Street, SW Mason City, IA 50401		50	<input type="checkbox"/>
4-1-04	ID# CK#	Larry McDaniel 115 E. Van Buren Centerville, IA 52544		50	<input type="checkbox"/>
4-1-04	ID# CK#	Richard Rawley 715 5th Avenue Grinnell, IA 50112		25	<input type="checkbox"/>
SUB-TOTAL				\$ 600	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reason Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
*Independent Insurance Agents of Iowa
 Political Action Committee*

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4-1-04	ID# CK#	Carlton Johnson 24 Westside Drive Iowa City, IA 52246		\$ 250	<input type="checkbox"/>
4-1-04	ID# CK#	Tim English P.O. Box 190 Dyersville, IA 52040		150	<input type="checkbox"/>
4-1-04	ID# CK#	Jackie Miller 1011 Grand Avenue West Des Moines, IA 52255		50	<input type="checkbox"/>
3-29-04	ID# CK#	Jerry Power P.O. Box 400 Moravia, IA 52571		50	<input type="checkbox"/>
3-29-04	ID# CK#	John Lookmann 2774 University Avenue Dubuque, IA 52004		100	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Mangler 724 North 2nd Street Clinton, IA 52732		50	<input type="checkbox"/>
3-29-04	ID# CK#	Jean Ballantyne 115 E. Maple Cherokee, IA 51012		100	<input type="checkbox"/>
3-29-04	ID# CK#	Burdell Hansen Box 31 Audubon, IA 50025		100	<input type="checkbox"/>
3-29-04	ID# CK#	Kevin Hummel 400 Evans Street Sloan, IA 51055		100	<input type="checkbox"/>
3-29-04	ID# CK#	Loras Neuroth P.O. Box 248 Marshalltown, IA 50158		100	<input type="checkbox"/>
SUB-TOTAL				\$ 1050	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)



SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	Curt Harris 251 Reed Street Akron, IA 51001		\$ 100	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Warner 207 E 7th, Box 130 Logan, IA 51546		100	<input type="checkbox"/>
3-29-04	ID# CK#	Joe Ruehlz P.O. Box 567 Sioux City, IA 51102		50	<input type="checkbox"/>
3-29-04	ID# CK#	Forrest Schnobrich P.O. Box 80 Casey, IA 50048		100	<input type="checkbox"/>
3-29-04	ID# CK#	Diane Christensen 724 N 2nd Street, Box 1058 Clinton, IA 52733		50	<input type="checkbox"/>
3-29-04	ID# CK#	Doug Follmann P.O. Box 877 Webster City, IA 50595		25	<input type="checkbox"/>
3-29-04	ID# CK#	L. Gene Enke Box 247 Fort Madison, IA 52627		50	<input type="checkbox"/>
3-29-04	ID# CK#	K. Sue Hase P.O. Box 47 Peterson, IA 51047		50	<input type="checkbox"/>
3-29-04	ID# CK#	Mark Currie 2501 Westown Parkway West Des Moines, IA 52266		50	<input type="checkbox"/>
3-29-04	ID# CK#	Randy Van Dyke Hwy 43, Box 97 Toka, IA 52342		100	<input type="checkbox"/>
SUB-TOTAL				\$ 675	
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	W. Craig Shepherd 11 East Church Street Box 248 Marshalltown, IA 50158		\$ 100	<input type="checkbox"/>
3-29-04	ID# CK#	Jon H. Waltz 1202 8th Street Red Oak, IA 51566		25	<input type="checkbox"/>
3-29-04	ID# CK#	Scott Draper 610 10th Street Marion, IA 52302		50	<input type="checkbox"/>
3-29-04	ID# CK#	Jeanne Bernhardt 1415 S Monroe Avenue Mesa, IA 50401		100	<input type="checkbox"/>
3-29-04	ID# CK#	Larry McArthur P.O. Box 362 Fairfield, IA 52556		100	<input type="checkbox"/>
3-29-04	ID# CK#	Verne Brunson 440 State Street Corning, IA 50438		50	<input type="checkbox"/>
3-29-04	ID# CK#	Mike Peterson P.O. Box 877 Webster City, IA 50595		25	<input type="checkbox"/>
3-29-04	ID# CK#	Bob Ernst 301 S. Riverview, Box 65 Bellevue, IA 52031		100	<input type="checkbox"/>
3-29-04	ID# CK#	Wayland Wogge P.O. Box 248 Forest City, IA 50436		250	<input type="checkbox"/>
3-29-04	ID# CK#	Dale Mabi P.O. Box 249 Newton, IA 50208		100	<input type="checkbox"/>
SUB-TOTAL				\$ 900	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
~~Independent Insurance Agents of Iowa~~
 Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	Gregory Peltfer 1201 A Avenue West Oskaloosa, IA 52577		\$ 100	<input type="checkbox"/>
3-29-04	ID# CK#	Insurance Associates of Iowa City, IA P.O. Box 150 Iowa City, IA 52244		300	<input type="checkbox"/>
3-29-04	ID# CK#	Robert E. Jetter P.O. Box 4779 Des Moines, IA 50306		250	<input type="checkbox"/>
3-29-04	ID# CK#	Mike Nelson 940 Lincoln Rd. Bettendorf, IA 52722		50	<input type="checkbox"/>
3-29-04	ID# CK#	Steve Vollstedt 441 Main Street Marilla, IA 51454		50	<input type="checkbox"/>
3-29-04	ID# CK#	Tom Ebeling 2013 4th St. SW Mason City, IA 50401		100	<input type="checkbox"/>
3-29-04	ID# CK#	Jeff Bahrenkamp P.O. Box 860 Spencer, IA 51301		100	<input type="checkbox"/>
3-29-04	ID# CK#	Kent Holtrah 27 S. Main Street Denison, IA 51442		100	<input type="checkbox"/>
3-29-04	ID# CK#	Clarence Hoffman 509 Maple Main Mapleton, IA 51034		250	<input type="checkbox"/>
3-29-04	ID# CK#	William O. McCay 120 South 6th Avenue Elbridge, IA 52748		100	<input type="checkbox"/>
SUB-TOTAL				\$1400	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	J. William Mark 120 West 2nd Street Hawcok, IA 52761		\$ 25	<input type="checkbox"/>
3-29-04	ID# CK#	Bill Gasper 2007 4th Street SW Mason City, IA 50401		50	<input type="checkbox"/>
3-29-04	ID# CK#	Jim Copeland 108 E. Vine De Moines, IA 50129		250	<input type="checkbox"/>
3-29-04	ID# CK#	Matthew J. Vogel P.O. Box 353 Oelwein, IA 50662		50	<input type="checkbox"/>
3-29-04	ID# CK#	Lee Haines P.O. Box 740 Mason City, IA 50402		100	<input type="checkbox"/>
3-29-04	ID# CK#	Scott Jemp P.O. Box 199 Chiroka, IA 51632		100	<input type="checkbox"/>
3-29-04	ID# CK#	Bernard Burbank 1912 1st Avenue SE, Box 856 Fort Dodge, IA 50501		50	<input type="checkbox"/>
3-29-04	ID# CK#	Barbara Harebrooks 402 S. Main Iowa, IA 51240		35	<input type="checkbox"/>
3-29-04	ID# CK#	George Shadle P.O. Box 433 Estherville, IA 51334		50	<input type="checkbox"/>
3-29-04	ID# CK#	Davis Winegar 24 Westside Drive Iowa City, IA 52246		50	<input type="checkbox"/>

SUB-TOTAL

\$ 760

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

For Instructions, See Back of Form

**CONTRIBUTIONS -- MONEY TAKEN IN**

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Independent Insurance Agents of Iowa
 Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
3-29-04	ID# CK#	Richard R. Koepke 403 Main Street Box 68 Durora, IA 50607		\$ 25	<input type="checkbox"/>
3-29-04	ID# CK#	David G. Sapperda 413 1st Avenue, Box 540 Rode Rapid, IA 51246		100	<input type="checkbox"/>
3-29-04	ID# CK#	Rick Schult 416 Main Street Ackley, IA 50601		25	<input type="checkbox"/>
3-29-04	ID# CK#	Boger East 11 1st Avenue NW, Box 471 Hampton, IA 50441		50	<input type="checkbox"/>
4-1-04	ID# CK#	Robert L. Patratz 712 Maple Street, Box 9 Fenton, IA 50539		50	<input type="checkbox"/>
3-29-04	ID# CK#	Milt Wilfers 317 N. Main Allison, IA 50602		50	<input type="checkbox"/>
4-1-04	ID# CK#	Mike Pertzborn 112 E. 5th Street Storm Lake, IA 50588		200	<input type="checkbox"/>
4-2-04	ID# CK#	Jim Lane P.O. Box 4779 Des Moines, IA 50313		100	<input type="checkbox"/>
4-2-04	ID# CK#	Carol Karne 12345 University Ave Des Moines, IA 50325		100	<input type="checkbox"/>
4-2-04	ID# CK#	Thomas S. Rushman P.O. Box 199 Osborne, IA 52161		100	<input type="checkbox"/>
SUB-TOTAL				\$ 800	
TOTAL (If last page of this schedule)				\$	

* Disclosure law requires cand/dates committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Independent Insurance Agents of Iowa
 Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4-2-04	ID# CK#	Tom Sloan P.O. Box 224 Wallace, IA 52171		\$ 25	<input type="checkbox"/>
4-2-04	ID# CK#	Gene Schaefer 506 Elm, Box 7 Williamsburg, IA 52361		100	<input type="checkbox"/>
4-2-04	ID# CK#	Deborah Lee Pedrick 1466 28th Street West Des Moines, IA 50266		50	<input type="checkbox"/>
4-7-04	ID# CK#	Ronald Krager P.O. Box 125 Petersburg, IA 51047		100	<input type="checkbox"/>
4-7-04	ID# CK#	Betty Lehr P.O. Box 302 Sioux Rapids, IA 50585		50	<input type="checkbox"/>
4-7-04	ID# CK#	Gail Stewart P.O. Box 210 Greenfield, IA 50849		100	<input type="checkbox"/>
4-7-04	ID# CK#	Dave Vermedahl P.O. Box 534 Vinton, IA 52349		100	<input type="checkbox"/>
4-7-04	ID# CK#	Deanne Bernhardt 1415 S. Monroe Avenue Mason City, IA 50401		250	<input type="checkbox"/>
4-7-04	ID# CK#	Martin Brown P.O. Box 798 Independence, IA 50644		150	<input type="checkbox"/>
4-7-04	ID# CK#	Joe Whittinger Box 355 Elma, IA 50628		50	<input type="checkbox"/>
SUB-TOTAL				\$ 975	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
*Independent Insurance Agents of Iowa
 Political Action Committee*

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4-7-04	ID# CK#	John Lillis Box 690 Williamsburg, IA 52361		\$ 100	<input type="checkbox"/>
4-7-04	ID# CK#	Gary Weers 100 1/2 3rd Street, Box 78 Anamosa, IA 52205		100	<input type="checkbox"/>
4-12-04	ID# CK#	Ken Reinking 319 Main Street Ireton, IA 51027		100	<input type="checkbox"/>
4-12-04	ID# CK#	Steve Gille 112 E 5th Street Storm Lake, IA 50588		100	<input type="checkbox"/>
4-12-04	ID# CK#	Mike Heitmann 507 3rd Street, Box 446 Upton, IA 52347		50	<input type="checkbox"/>
4-12-04	ID# CK#	Steve Banyas 114 N. Washington, Box 578 Ottumwa, IA 52501		100	<input type="checkbox"/>
4-12-04	ID# CK#	Leon Hendricks P.O. Box 351 Winterset, IA 50273		50	<input type="checkbox"/>
4-12-04	ID# CK#	Mary Donaghy 206 N. Buxton Anthon, IA 50025		25	<input type="checkbox"/>
4-12-04	ID# CK#	Jim Goodin P.O. Box 7 Seeger, IA 51054		25	<input type="checkbox"/>
4-12-04	ID# CK#	James R. Fox 1302 Walnut, Box 514 Dallas Center, IA 50003		50	<input type="checkbox"/>
SUB-TOTAL				\$ 700	
TOTAL (If last page of this schedule)				\$	

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Reset Form

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
4-28-04	ID# CK#	Pete Layden 421 4th Avenue SE, Box 1863 Cedar Rapids, IA 52401		\$ 100	<input type="checkbox"/>
4-28-04	ID# CK#	Larry D. Curran P.O. Box 85 Humboldt, IA 50548		50 100	<input type="checkbox"/>
4-28-04	ID# CK#	Diane Boos 25 East Main New Hampton, IA 50657		100	<input type="checkbox"/>
4-28-04	ID# CK#	Bill Lorme 103 E. Bridge Street Elkader, IA 52043		100	<input type="checkbox"/>
4-28-04	ID# CK#	Jonathan Petersen P.O. Box 128 Groettinger, IA 51342		25	<input type="checkbox"/>
4-28-04	ID# CK#	Lloyd Petersen P.O. Box 128 Groettinger, IA 51342		50	<input type="checkbox"/>
4-28-04	ID# CK#	Craig Well 1902 Grosvenor Drive Iowa City, IA 52246		100	<input type="checkbox"/>
4-28-04	ID# CK#	James Owens P.O. Box 58 Traer, IA 50675		25	<input type="checkbox"/>
4-28-04	ID# CK#	Tim Reimers P.O. Box 637 Durant, IA 52747		50	<input type="checkbox"/>
4-28-04	ID# CK#	Steve Brown P.O. Box 410 Oskaloosa, IA 52577		50	<input type="checkbox"/>
SUB-TOTAL				\$ 650	
TOTAL (if last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Finance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4-28-04	ID# CK#	Noel C. Friday Box 280 Osceola, IA 50213		\$ 50	<input type="checkbox"/>
4-28-04	ID# CK#	Brian L. Anderson 414 Northwestern Avenue Ames, IA 50010		100	<input type="checkbox"/>
4-28-04	ID# CK#	Phil Andrews 3343 Southgate Circle Cedar Rapids, IA 52404		50	<input type="checkbox"/>
4-28-04	ID# CK#	Roger Chase P.O. Box 833 Marshalltown, IA 50158		100	<input type="checkbox"/>
4-28-04	ID# CK#	Jack Martin P.O. Box 136 West Liberty, IA 52776		100	<input type="checkbox"/>
4-28-04	ID# CK#	Dennis K. Samuelson P.O. Box 50 Radcliffe, IA 50230		250	<input type="checkbox"/>
4-28-04	ID# CK#	Steve Allen 8400 Hickman Road Clivo, IA 50325		50	<input type="checkbox"/>
4-28-04	ID# CK#	Valerie Bilbrey 5701 Greenbide Road Johnston, IA 50131		100	<input type="checkbox"/>
4-28-04	ID# CK#	Ken Bilbrey 5701 Greenbide Road Johnston, IA 50131		100	<input type="checkbox"/>
4-28-04	ID# CK#	Joseph Campanelli 24 Westside Drive Ft. City		25	<input type="checkbox"/>
SUB-TOTAL				\$ 925	
TOTAL (If last page of this schedule)				\$	

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Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONEY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4-28-04	ID# CK#	Larry Donaghy 4000 4th Avenue Des Moines, IA 50313		\$ 100	<input type="checkbox"/>
4-28-04	ID# CK#	Barbara J. Nielsen P.O. Box 190 Preston, IA 52069		50	<input type="checkbox"/>
4-28-04	ID# CK#	Norman A. Nielsen P.O. Box 190 Preston, IA 52069		100	<input type="checkbox"/>
4-28-04	ID# CK#	Frank Dawole 3927 University Avenue Waterloo, IA 50701		250	<input type="checkbox"/>
2-1-04	ID# CK#	Robert Andrews 466 28th Street Des Moines, IA 50325		250	<input type="checkbox"/>
1-29-04	ID# CK#	Dennis Bedder 1825 4th Street SW Box 1406 Mason City, IA 50402		50	<input type="checkbox"/>
3-1-04	ID# CK#	David Bernhardt 1415 S. Monroe Mason City, IA 50401		100	<input type="checkbox"/>
2-3-04	ID# CK#	Jerry Block 506 6th Avenue, Box 350 Amesbury, IA 50514		50	<input type="checkbox"/>
3-23-04	ID# CK#	Bruce Brown 12345 University Avenue Des Moines, IA 50325		100	<input type="checkbox"/>
2-23-04	ID# CK#	Richard Christensen 202 E. State St, Box 514 Marshalltown, IA 50158		50	<input type="checkbox"/>
SUB-TOTAL				\$ 1100	
TOTAL (If last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2-5-04	ID# CK#	Kelly Cooper 126 N. Walnut, Box 97 Calmar, IA 50004		\$ 25	<input type="checkbox"/>
1-30-04	ID# CK#	John Dalton 2351 Highway 191 Council Bluffs, IA 51503		100	<input type="checkbox"/>
3-23-04	ID# CK#	Patrice Doyle 112 W. Briggs Avenue, Box 71 Fairfield, IA 52556		100	<input type="checkbox"/>
2-4-04	ID# CK#	Wade Ellerbroek 219 9th Street, Box 154 Sibley, IA 51249		100	<input type="checkbox"/>
4-7-04	ID# CK#	ED Engelbort 900 E. 3rd Street, Box 78 Anamosa, IA 52205		100	<input type="checkbox"/>
3-23-04	ID# CK#	Deborah Foltz 100 S. Taylor, Box 626 Mount Airy, IA 50854		100	<input type="checkbox"/>
4-21-04	ID# CK#	Ron Fullenkamp P.O. Box 367 West Point, IA 52656		100	<input type="checkbox"/>
3-23-04	ID# CK#	Tom Gamrath 112 W. Briggs Avenue, Box 71 Fairfield, IA 52556		100	<input type="checkbox"/>
4-12-04	ID# CK#	David Gretzman 704 W. Hwy 30, Box 707 Carroll, IA 51401		50	<input type="checkbox"/>
4-12-04	ID# CK#	James Gretzman 704 W. Hwy 30, Box 707 Carroll, IA 51401		50	<input type="checkbox"/>
SUB-TOTAL				\$ 825	
TOTAL (If last page of this schedule)				\$	

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For Instructions, See Back of Form

Receipt Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 88B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
4-12-04	ID# CK#	Matthew Gretelman 704 W Hwy. 30, Box 707 Carroll, IA 51401		\$ 50	<input type="checkbox"/>
4-12-04	ID# CK#	Michael Gretelman 704 W. Hwy 30, Box 707 Carroll, IA 51401		50	<input type="checkbox"/>
2-2-04	ID# CK#	Tim Harrison 517 Main St, Box 346 Dumont, IA 50625		50	<input type="checkbox"/>
3-16-04	ID# CK#	Curtis Meyers 612 E. Pierce St, Box 1906 Council Bluffs, IA 51502		50	<input type="checkbox"/>
2-24-04	ID# CK#	Doug Henderson 2841 Johnson Ave NW Cedar Rapids, IA 52405		100	<input type="checkbox"/>
2-25-04	ID# CK#	Philip Henriksen 500 6th St, Box 136 Armstrong, IA 50514		50	<input type="checkbox"/>
2-24-04	ID# CK#	Don Holdsworth 513 Ann Street, Box 236 Iowa, IA 51446		100	<input type="checkbox"/>
2-10-04	ID# CK#	Telesa Horgendorn 201 S. Story St. #B Rode Rapids, IA 52446		100	<input type="checkbox"/>
2-5-04	ID# CK#	Kirk Huisenga 955 2nd Avenue, Box 66 Sibay, IA 51249		100	<input type="checkbox"/>
2-12-04	ID# CK#	Eldon Hunsicker 219 W. Fourth St, Box 370 Ottumwa, IA 52501		100	<input type="checkbox"/>
SUB-TOTAL				\$ 750	
TOTAL (If last page of this schedule)				\$	

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

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SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM**COMMITTEE NAME** (Must be same as on Statement of Organization)Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2-24-04	ID# CK#	Take Jacobson UC Hwy 63 South, Box 97 Tule, IA 52342		\$ 100	<input type="checkbox"/>
2-23-04	ID# CK#	Dennis Johnson 924 Central Avenue, Box 1707 Fort Dodge, IA 50501		100	<input type="checkbox"/>
2-5-04	ID# CK#	Brenda Jones 126 N. Walnut, Box 97 Colfax, IA 50654		25	<input type="checkbox"/>
3-23-04	ID# CK#	Paul Koehler 25 S. 1st Avenue, Box 129 Marshalltown, IA 50158		100	<input type="checkbox"/>
2-23-04	ID# CK#	Ray Lenz 105 N. 3rd, Box 69 Breda, IA 51436		100	<input type="checkbox"/>
2-24-04	ID# CK#	Dave Ludovick 787 W. Locust Dubuque, IA 52001		100	<input type="checkbox"/>
4-8-04	ID# CK#	Mark Lyons 4200 University Ave, #200 West Des Moines, IA 50263		100	<input type="checkbox"/>
2-23-04	ID# CK#	Steve Maurer 523 Lombard, Box 460 Clarence, IA 52216		25	<input type="checkbox"/>
3-23-04	ID# CK#	Dan McKay 106 E. Main, Box 151 Knoxville, IA 50138		250	<input type="checkbox"/>
3-18-04	ID# CK#	Jerry Mease 110 S. 1st Avenue, Box 127 Winterset, IA 50273		100	<input type="checkbox"/>
SUB-TOTAL				\$ 1000	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

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CONTRIBUTIONS -- MONEY TAKEN IN

(including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)Independent Insurance Agents of Iowa
Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2-24-04	ID# CK#	Clark McElford 112 N. Market, Box 1549 Ottumwa, IA 52501		\$ 100	<input type="checkbox"/>
1-29-04	ID# CK#	Kathy Mens 1125 6th St, Box 58 Nevada, IA 50201		100	<input type="checkbox"/>
2-26-04	ID# CK#	Robert Miller 909 Main St, Box 759 Dubuque, IA 52004		100	<input type="checkbox"/>
2-23-04	ID# CK#	Scott Morningstar 119 E. Main, Box 367 Lisbon, IA 52253		100	<input type="checkbox"/>
3/21/2004	ID# CK#	Willene White PO Box 370 Ottumwa, IA 52501		100	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
SUB-TOTAL				\$ 500	
TOTAL (If last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

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CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Independent Insurance Agents of Iowa
 Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2/5/2004	ID# CK#	Bill Pearson PO Box 66 Sibley, IA 51249		\$ 100.00	<input type="checkbox"/>
1/29/2004	ID# CK#	Michael Pearson PO Box 37 Corwith, IA 50430		100.00	<input type="checkbox"/>
4/6/2004	ID# CK#	Brian Petersburg PO Box 67 Decorah, IA 52101		100.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Kenneth L Petersen PO Box 140 Grimes, IA 50111		50.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Gordon Quam PO Box 186 Boone, IA 50036		100.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Dana Ramundt 12345 University Ave. #300 Des Moines, IA 50325		250.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Ron Rensink PO Box 190 Sheldon, IA 51201		100.00	<input type="checkbox"/>
4/1/2004	ID# CK#	David Sackville PO Box 117 Hampton, IA 50441		25.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Mike Schwantz PO Box 130 Ottumwa, IA 52501		100.00	<input type="checkbox"/>
3/1/2004	ID# CK#	Bob Skow 4000 Westown Parkway, Ste. 200 West Des Moines, IA 50266		150.00	<input type="checkbox"/>

SUB-TOTAL

\$ 1,075

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

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CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
 Independent Insurance Agents of Iowa
 Political Action Committee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

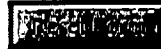
CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2/24/2004	ID# CK#	John Sloan PO Box 224 Waucoma, IA 52171		\$ 25.00	<input type="checkbox"/>
3/23/2004	ID# CK#	Russ Sporer PO Box 370 Ottumwa, IA 52501		150.00	<input type="checkbox"/>
2/5/2004	ID# CK#	Alisa Stanton PO Box 66 Sibley, IA 51249		100.00	<input type="checkbox"/>
2/5/2004	ID# CK#	Dixie Stayner PO Box 97 Colfax, IA 50054		25.00	<input type="checkbox"/>
4/12/2004	ID# CK#	A. J. Tentinger 31 Plymouth St NW LeMars, IA 51031		50.00	<input type="checkbox"/>
2/25/2004	ID# CK#	Lorrie Thompson 309 N Second St Wapello, IA 52653		100.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Dave Van Engelenhoven 122 Central Ave SW Orange City, IA 51041		100.00	<input type="checkbox"/>
3/1/2004	ID# CK#	Mark Warner PO Box 130 Logan, IA 51546		100.00	<input type="checkbox"/>
2/5/2004	ID# CK#	Philip Webb PO Box 97 Colfax, IA 50054		100.00	<input type="checkbox"/>
2/23/2004	ID# CK#	Joe Weinman 213 West Salem Indianola, IA 50125		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 850	
TOTAL (if last page of this schedule)				\$ 17,800	

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 (for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

**EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT**

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)
Independent Insurance Agents of Iowa
Political Action Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
1-2-04	ID# 586 CK# 2723	Giff for Representative 212 High Decorah, IA 52101	Political Fundraiser	\$ 100
1-2-04	ID# 142 CK# 2724	Citizens for Growth 220 Bennett Avenue Council Bluffs, IA 51503	Political Fundraiser	100
1-2-04	ID# 662 CK# 2725	Rents for State House 2740 South Cross Street Stacy City, IA 51106	Political Fundraiser	100
1-2-04	ID# 931 CK# 2726	Iverson for Senate 3020 Dow-Williams Road Dows, IA 50071	Political Fundraiser	100
1-6-04	ID# 868 CK# 2728	Jacob's Committee 808 5th Street West Des Moines, IA 50266	Political Fundraiser	250
1-7-04	ID# 1304 CK# 2729	Neighbors for Hatch 1629 Woodland Avenue Des Moines, IA 50309	Political Fundraiser	250
5-3-04	ID# 1169 CK# 2730	Lambert for Senate 2621 NW 17th Street Ankeny, IA 50021	Political Fundraiser	250
5-3-04	ID# 931 CK# 2731	Iverson for Senate 3020 Dow-Williams Road Dows, IA 50071	Political Fundraiser	250
SUB-TOTAL				\$ 1400
TOTAL (if last page of this schedule)				\$

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
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 Independent Insurance Agents of Iowa
 Political Action Committee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
5-3-04	ID# 964 CK# 2732	Angelo for Senate 808 W. Jefferson Creston, IA 50801	Political Fundraiser	\$ 250
5-4-04	ID# 1088 CK# 2733	Harbock for House of Representatives 1014 Oakland Drive Tama, IA 52339	Political Fundraiser	1,000.00
5-11-04	ID# 965 CK# 2734	Packard for Senate Committee P.O. Box 308 Marshalltown, IA 50158	Political Fundraiser	250
5-12-04	ID# 315 CK# 2735	Wise Voters 503 Grand Avenue Keokuk, IA 52632	Political Fundraiser	200
5-12-04	ID# 1200 CK# 2736	Peterson for State Representative 1346 47th Street Des Moines, IA 50311	Political Fundraiser	200
5-12-04	ID# 987 CK# 2737	Hyer for State Representative 213 7th Street NW Altaona, IA 50009	Political Fundraiser	200
5-13-04	ID# 142 CK# 2738	Citizens for Grant 220 Bennett Avenue Council Bluffs, IA 51503	Political Fundraiser	500
5-13-04	ID# 1094 CK# 2739	Veenstra for State Representative 216 Arizona Avenue SW Orange City, IA 51041	Political Fundraiser	250
SUB-TOTAL				\$ 2850
TOTAL (If last page of this schedule)				\$ 4250

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Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detailed on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)